

Amendment to the Claims

This listing of claims will replace all prior versions and listings of claims in the application.

Listing of Claims:

1. *(currently amended)* A method for ~~confirming a~~ making a diagnosis of sepsis, said method comprising determining the amount of anti-asialo-G_{M1} antibodies (anti-AG_{M1} antibodies) of the IgG and/or IgA type in blood, a blood fraction or secretion of a patient in whom sepsis-associated symptoms are present following a sepsis-risk event, wherein an elevated concentration of anti-asialo-G_{M1} antibodies in said blood compared to a healthy individual is indicative of sepsis.
- 2-3. *(cancelled)*
4. *(previously amended)* The method according to Claim 1, wherein said determining step is carried out with an assay type selected from a sandwich assay, a competitive assay and an agglutination assay.
5. *(cancelled)*
6. *(previously amended)* The method according to Claim 1, wherein at least one further sepsis parameter is simultaneously determined.
7. *(previously amended)* The method according to Claim 6, wherein the at least one further parameter is procalcitonin₇.
- 8-13. *(cancelled)*

14. **(new)** A method for estimating the risk of a patient to develop sepsis following a sepsis risk-inducing event, said method comprising:

- a) identifying a patient potentially at risk for sepsis following a sepsis risk-inducing event; and
- b) determining the level of anti-asialo- G_{M1} (anti- AG_{M1}) antibodies of the IgG and/or IgA type in a blood sample, blood fraction or secretion from said patient, wherein an increased level of said antibodies in said sample indicates an increased risk that the patient will develop sepsis.

15. **(new)** The method of claim 14, wherein said sepsis risk-inducing event is surgery, burn, or trauma.

16. **(new)** The method of claim 14, wherein said method is carried out using a ligand binding assay of the sandwich type, or competitive type, or an agglutination assay.

17. **(new)** The method of claim 14, further comprising determining the level of procalcitonin, wherein increased levels of procalcitonin and anti- AG_{M1} antibodies of the IgG and/or IgA type when compared to normal individuals indicate an increased risk of the patient developing sepsis.